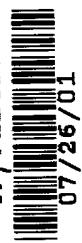


## Transmittal Form w Declaration

<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))		Attorney Docket No. <b>TOR-027</b>		Total Pages		
		First named Inventor or Application Identifier			Ryota KIDO	
		Title of Invention		RUBBER-REINFORCED STYRENE TRANSPARENT RESIN COMPOSITION AND METHOD OF PRODUCING THE SAME		
<b>APPLICATION ELEMENTS</b> See MPEP chapter 600 concerning utility patent application contents.			ADDRESS TO: Assistant Commissioner for Patents Box Patent Application Washington, DC 20231			
1. <input checked="" type="checkbox"/> Fee Transmittal Form 2. <input checked="" type="checkbox"/> Specification [Total Pages <u>84</u> ] - Descriptive title of the Invention - Cross References to Related Applications - Statement Regarding Fed sponsored R & D - Reference to Microfiche Appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 3. <input checked="" type="checkbox"/> Formal Drawing(s) (35 USC 113) [Total Sheets <u>4</u> ] 4. <input type="checkbox"/> Oath or Declaration [Total pages <u>1</u> ] a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b). 5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.			6. <input type="checkbox"/> Microfiche Computer Program (Appendix) 7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies  <b>ACCOMPANYING APPLICATION PARTS</b> 8. <input type="checkbox"/> Assignment papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement (When there is an assignee) <input type="checkbox"/> Power of Attorney 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure Statement (IDS) /PTO-1449 <input type="checkbox"/> Copies of IDS Citations (* docs) 12. <input checked="" type="checkbox"/> Preliminary Amendment with Version with Markings to Show Changes Made 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Assertion to Entitlement to Small Entity Status <input type="checkbox"/> Assertion filed in prior application, status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Priority of application No. * filed on * in * is claimed under 35 USC 119. <input type="checkbox"/> The certified copy has been filed in prior application Serial No. 08/*. 16. <input type="checkbox"/> Other: *			
<b>OTHER</b> 17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information: <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in part (CIP) of prior application No.:						
<b>18. CORRESPONDENCE ADDRESS</b>						
<input type="checkbox"/> Customer Number or Bar Code Label <b>020374</b> or <input type="checkbox"/> Correspondence address below						
NAME	KUBOVCIK & KUBOVCIK					
ADDRESS	900 17th Street, N.W.					
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FILING DATE	July 26, 2001	TEL	202-887-9023	FAX	202-887-9093	

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 09/26/01  
 PTO-1449

## FEE TRANSMITTAL

Note: Effective October 1, 2000

Application Number	09/
Filing Date	July 26, 2001
First Named Inventor	Ryota KIDO
Group Art Unit	Not Assigned
Examiner Name	Not Assigned
Attorney Docket Number	TOR-027

CLAIMS AS FILED-PART 1			SMALL ENTITY		OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEES	RATE	FEES
BASIC FEE (37 CFR 1.16 (a))				\$355.00		\$710.00
TOTAL CLAIMS (37 CFR 1.16 (c))	<u>52</u> - 20 =	32	\$9.00		\$18.00	\$576.00
INDEPENDENT CLAIMS (37 CFR 1.16 (B))	<u>2</u> - 3 =		\$40.00		\$80.00	\$0.00
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16 (d))			\$135.00		\$270.00	\$270.00
			SUB TOTAL		SUB TOTAL	\$1,556.00
SURCHARGE-LATE FILING FEE OR DECLARATION			\$65.00		\$130.00	\$130.00
RECORDING ASSIGNMENT			\$40.00		\$40.00	\$40.00
<b>TOTAL</b>			<b>\$0.00</b>			<b>\$1,726.00</b>

### METHOD OF PAYMENT

Payment Deferred

### SIGNATURE OF ATTORNEY, OR AGENT

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